

Fill in this information to identify your case:

United States Bankruptcy Court for the:

DISTRICT OF NEW JERSEY

Case number (if known)

Chapter you are filing under:

☐ Chapter 7

☒ Chapter 11

☐ Chapter 12

☐ Chapter 13

☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

06/24

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

About Debtor 1:

About Debtor 2 (Spouse Only in a Joint Case):

1. Your full name

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bolivar

First name

F.

Middle name

Bring your picture identification to your meeting with the trustee.

Martinez Cueva

Last name and Suffix (Sr., Jr., II, III)

First name

Middle name

Last name and Suffix (Sr., Jr., II, III)

2. All other names you have used in the last 8 years

Include your married or maiden names and any assumed, trade names and *doing business as* names.

Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.

3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

xxx-xx-5171

Debtor 1 **Bolivar F. Martinez Cueva**

Case number (if known)

About Debtor 1:

About Debtor 2 (Spouse Only in a Joint Case):

4. Your Employer Identification Number (EIN), if any.

EIN

EIN

5. Where you live

**14 Oxford Street
Newark, NJ 07105**

Number, Street, City, State & ZIP Code

Essex

County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

If Debtor 2 lives at a different address:

Number, Street, City, State & ZIP Code

County

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

6. Why you are choosing *this district* to file for bankruptcy

Check one:

- ☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- ☐ I have another reason.
Explain. (See 28 U.S.C. § 1408.)

Check one:

- ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- ☐ I have another reason.
Explain. (See 28 U.S.C. § 1408.)

Debtor 1 **Bolivar F. Martinez Cueva**

Case number (if known) _____

Part 2: Tell the Court About Your Bankruptcy Case

7. **The chapter of the Bankruptcy Code you are choosing to file under** *Check one.* (For a brief description of each, see *Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)*). Also, go to the top of page 1 and check the appropriate box.
- ☐ Chapter 7
- ☒ Chapter 11
- ☐ Chapter 12
- ☐ Chapter 13
-
8. **How you will pay the fee** ☒ **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
- ☐ **I need to pay the fee in installments.** If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).
- ☐ **I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.
-
9. **Have you filed for bankruptcy within the last 8 years?** ☒ No.
- ☐ Yes.
- | | | |
|----------------|------------|-------------------|
| District _____ | When _____ | Case number _____ |
| District _____ | When _____ | Case number _____ |
| District _____ | When _____ | Case number _____ |
-
10. **Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?** ☒ No
- ☐ Yes.
- | | |
|----------------|--|
| Debtor _____ | Relationship to you _____ |
| District _____ | When _____ Case number, if known _____ |
| Debtor _____ | Relationship to you _____ |
| District _____ | When _____ Case number, if known _____ |
-
11. **Do you rent your residence?** ☒ No. Go to line 12.
- ☐ Yes. Has your landlord obtained an eviction judgment against you?
- ☐ No. Go to line 12.
- ☐ Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it as part of this bankruptcy petition.

Debtor 1 **Bolivar F. Martinez Cueva**

Case number (if known)

Part 3: Report About Any Businesses You Own as a Sole Proprietor

12. Are you a sole proprietor of any full- or part-time business?

☒ No. Go to Part 4.

☐ Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Name of business, if any

Number, Street, City, State & ZIP Code

Check the appropriate box to describe your business:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
☐ None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor?

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

☐ No. I am not filing under Chapter 11.

☒ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

☐ Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11.

☐ Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11.

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

☒ No.

☐ Yes.

What is the hazard? _____

If immediate attention is needed, why is it needed? _____

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

Where is the property? _____

Number, Street, City, State & Zip Code

Debtor 1 **Bolivar F. Martinez Cueva**

Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

- ☒ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ **I am not required to receive a briefing about credit counseling because of:**

- ☐ **Incapacity.**
I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

- ☐ **Disability.**
My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

- ☐ **Active duty.**
I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ **I am not required to receive a briefing about credit counseling because of:**

- ☐ **Incapacity.**
I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

- ☐ **Disability.**
My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

- ☐ **Active duty.**
I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 **Bolivar F. Martinez Cueva**

Case number (if known)

Part 6: Answer These Questions for Reporting Purposes

| | | | | | | | | | | | | | |
|--|---|--|--|--|---|--|---|--|---|--|--|--|---|
| 16. What kind of debts do you have? | 16a. Are your debts primarily consumer debts? <i>Consumer debts</i> are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input checked="" type="checkbox"/> No. Go to line 16b. <input type="checkbox"/> Yes. Go to line 17. | | | | | | | | | | | | |
| | 16b. Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. <input type="checkbox"/> No. Go to line 16c. <input checked="" type="checkbox"/> Yes. Go to line 17. | | | | | | | | | | | | |
| | 16c. State the type of debts you owe that are not consumer debts or business debts _____ | | | | | | | | | | | | |
| <hr/> | | | | | | | | | | | | | |
| 17. Are you filing under Chapter 7? | <input checked="" type="checkbox"/> No. I am not filing under Chapter 7. Go to line 18. | | | | | | | | | | | | |
| Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | <input type="checkbox"/> Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? <input type="checkbox"/> No <input type="checkbox"/> Yes | | | | | | | | | | | | |
| <hr/> | | | | | | | | | | | | | |
| 18. How many Creditors do you estimate that you owe? | <table border="0"><tr><td><input type="checkbox"/> 1-49</td><td><input type="checkbox"/> 1,000-5,000</td><td><input type="checkbox"/> 25,001-50,000</td></tr><tr><td><input checked="" type="checkbox"/> 50-99</td><td><input type="checkbox"/> 5001-10,000</td><td><input type="checkbox"/> 50,001-100,000</td></tr><tr><td><input type="checkbox"/> 100-199</td><td><input type="checkbox"/> 10,001-25,000</td><td><input type="checkbox"/> More than 100,000</td></tr><tr><td><input type="checkbox"/> 200-999</td><td></td><td></td></tr></table> | <input type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000 | <input type="checkbox"/> 25,001-50,000 | <input checked="" type="checkbox"/> 50-99 | <input type="checkbox"/> 5001-10,000 | <input type="checkbox"/> 50,001-100,000 | <input type="checkbox"/> 100-199 | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 | <input type="checkbox"/> 200-999 | | |
| <input type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000 | <input type="checkbox"/> 25,001-50,000 | | | | | | | | | | | |
| <input checked="" type="checkbox"/> 50-99 | <input type="checkbox"/> 5001-10,000 | <input type="checkbox"/> 50,001-100,000 | | | | | | | | | | | |
| <input type="checkbox"/> 100-199 | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 | | | | | | | | | | | |
| <input type="checkbox"/> 200-999 | | | | | | | | | | | | | |
| <hr/> | | | | | | | | | | | | | |
| 19. How much do you estimate your assets to be worth? | <table border="0"><tr><td><input checked="" type="checkbox"/> \$0 - \$50,000</td><td><input type="checkbox"/> \$1,000,001 - \$10 million</td><td><input type="checkbox"/> \$500,000,001 - \$1 billion</td></tr><tr><td><input type="checkbox"/> \$50,001 - \$100,000</td><td><input type="checkbox"/> \$10,000,001 - \$50 million</td><td><input type="checkbox"/> \$1,000,000,001 - \$10 billion</td></tr><tr><td><input type="checkbox"/> \$100,001 - \$500,000</td><td><input type="checkbox"/> \$50,000,001 - \$100 million</td><td><input type="checkbox"/> \$10,000,000,001 - \$50 billion</td></tr><tr><td><input type="checkbox"/> \$500,001 - \$1 million</td><td><input type="checkbox"/> \$100,000,001 - \$500 million</td><td><input type="checkbox"/> More than \$50 billion</td></tr></table> | <input checked="" type="checkbox"/> \$0 - \$50,000 | <input type="checkbox"/> \$1,000,001 - \$10 million | <input type="checkbox"/> \$500,000,001 - \$1 billion | <input type="checkbox"/> \$50,001 - \$100,000 | <input type="checkbox"/> \$10,000,001 - \$50 million | <input type="checkbox"/> \$1,000,000,001 - \$10 billion | <input type="checkbox"/> \$100,001 - \$500,000 | <input type="checkbox"/> \$50,000,001 - \$100 million | <input type="checkbox"/> \$10,000,000,001 - \$50 billion | <input type="checkbox"/> \$500,001 - \$1 million | <input type="checkbox"/> \$100,000,001 - \$500 million | <input type="checkbox"/> More than \$50 billion |
| <input checked="" type="checkbox"/> \$0 - \$50,000 | <input type="checkbox"/> \$1,000,001 - \$10 million | <input type="checkbox"/> \$500,000,001 - \$1 billion | | | | | | | | | | | |
| <input type="checkbox"/> \$50,001 - \$100,000 | <input type="checkbox"/> \$10,000,001 - \$50 million | <input type="checkbox"/> \$1,000,000,001 - \$10 billion | | | | | | | | | | | |
| <input type="checkbox"/> \$100,001 - \$500,000 | <input type="checkbox"/> \$50,000,001 - \$100 million | <input type="checkbox"/> \$10,000,000,001 - \$50 billion | | | | | | | | | | | |
| <input type="checkbox"/> \$500,001 - \$1 million | <input type="checkbox"/> \$100,000,001 - \$500 million | <input type="checkbox"/> More than \$50 billion | | | | | | | | | | | |
| <hr/> | | | | | | | | | | | | | |
| 20. How much do you estimate your liabilities to be? | <table border="0"><tr><td><input type="checkbox"/> \$0 - \$50,000</td><td><input checked="" type="checkbox"/> \$1,000,001 - \$10 million</td><td><input type="checkbox"/> \$500,000,001 - \$1 billion</td></tr><tr><td><input type="checkbox"/> \$50,001 - \$100,000</td><td><input type="checkbox"/> \$10,000,001 - \$50 million</td><td><input type="checkbox"/> \$1,000,000,001 - \$10 billion</td></tr><tr><td><input type="checkbox"/> \$100,001 - \$500,000</td><td><input type="checkbox"/> \$50,000,001 - \$100 million</td><td><input type="checkbox"/> \$10,000,000,001 - \$50 billion</td></tr><tr><td><input type="checkbox"/> \$500,001 - \$1 million</td><td><input type="checkbox"/> \$100,000,001 - \$500 million</td><td><input type="checkbox"/> More than \$50 billion</td></tr></table> | <input type="checkbox"/> \$0 - \$50,000 | <input checked="" type="checkbox"/> \$1,000,001 - \$10 million | <input type="checkbox"/> \$500,000,001 - \$1 billion | <input type="checkbox"/> \$50,001 - \$100,000 | <input type="checkbox"/> \$10,000,001 - \$50 million | <input type="checkbox"/> \$1,000,000,001 - \$10 billion | <input type="checkbox"/> \$100,001 - \$500,000 | <input type="checkbox"/> \$50,000,001 - \$100 million | <input type="checkbox"/> \$10,000,000,001 - \$50 billion | <input type="checkbox"/> \$500,001 - \$1 million | <input type="checkbox"/> \$100,000,001 - \$500 million | <input type="checkbox"/> More than \$50 billion |
| <input type="checkbox"/> \$0 - \$50,000 | <input checked="" type="checkbox"/> \$1,000,001 - \$10 million | <input type="checkbox"/> \$500,000,001 - \$1 billion | | | | | | | | | | | |
| <input type="checkbox"/> \$50,001 - \$100,000 | <input type="checkbox"/> \$10,000,001 - \$50 million | <input type="checkbox"/> \$1,000,000,001 - \$10 billion | | | | | | | | | | | |
| <input type="checkbox"/> \$100,001 - \$500,000 | <input type="checkbox"/> \$50,000,001 - \$100 million | <input type="checkbox"/> \$10,000,000,001 - \$50 billion | | | | | | | | | | | |
| <input type="checkbox"/> \$500,001 - \$1 million | <input type="checkbox"/> \$100,000,001 - \$500 million | <input type="checkbox"/> More than \$50 billion | | | | | | | | | | | |

Part 7: Sign Below

For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Bolivar F. Martinez Cueva
Bolivar F. Martinez Cueva
Signature of Debtor 1

Executed on June 12, 2025
MM / DD / YYYY

Signature of Debtor 2

Executed on _____
MM / DD / YYYY

Debtor 1 **Bolivar F. Martinez Cueva**

Case number (if known)

For your attorney, if you are represented by one

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

If you are not represented by an attorney, you do not need to file this page.

/s/ Steven D Pertuz

Date

June 12, 2025

Signature of Attorney for Debtor

MM / DD / YYYY

Steven D Pertuz

Printed name

The Law Offices Of Steven D Pertuz LLC

Firm name

111 Northfield Avenue Suite 304

West Orange, NJ 07052

Number, Street, City, State & ZIP Code

Contact phone **(973) 669-8600**

Email address

pertuzlaw@verizon.net

008542001 NJ

Bar number & State

Debtor 1 Bolivar F. Martinez Cueva Case number (if known) _____

| | |
|--|---|
| 3 AMERICAN EXPRESS PO BOX 31511 Salt Lake City, UT 84131 _____ _____ Contact _____ Contact phone | What is the nature of the claim? <u>Credit card purchases</u> <u>\$41,446.34</u> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured) _____ Value of security: - _____ Unsecured claim _____ |
|--|---|

| | |
|--|---|
| 4 AMERICAN EXPRESS PO Box 981537 El Paso, TX 79998 _____ _____ Contact _____ Contact phone | What is the nature of the claim? <u>Credit card purchases</u> <u>\$41,428.00</u> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured) _____ Value of security: - _____ Unsecured claim _____ |
|--|---|

| | |
|--|---|
| 5 BEACON _____ _____ Contact _____ Contact phone | What is the nature of the claim? <u>Credit card purchases</u> <u>\$21,177.00</u> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured) _____ Value of security: - _____ Unsecured claim _____ |
|--|---|

| | |
|---|--|
| 6 IRM CAPITAL (SKYLIANCE) _____ _____ Contact _____ Contact phone | What is the nature of the claim? <u>Credit card purchases</u> <u>\$17,194.00</u> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured) _____ Value of security: - _____ |
|---|--|

Debtor 1 **Bolivar F. Martinez Cueva** Case number (if known) _____

Contact phone _____

Unsecured claim _____

7
Mulligan Funding LLC

What is the nature of the claim? Credit card purchases \$55,433.50

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☒ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
☐ Yes. Total claim (secured and unsecured) _____
Value of security: _____
Unsecured claim _____

Contact _____

Contact phone _____

8
NJ Manufacturers Insurance Group
One Pierce Pl, Suite 725W
Itasca, IL 60143

What is the nature of the claim? Credit card purchases \$85,371.54

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☒ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
☐ Yes. Total claim (secured and unsecured) _____
Value of security: _____
Unsecured claim _____

Contact _____

Contact phone _____

9
ON DECK CAPITAL, INC.
102 LAUREL OAK RD, STE 303
Voorhees, NJ 08043

What is the nature of the claim? Credit card purchases \$233,480.70

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☒ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
☐ Yes. Total claim (secured and unsecured) _____
Value of security: _____
Unsecured claim _____

Contact _____

Contact phone _____

10
PAMPCO

What is the nature of the claim? Credit card purchases \$14,235.00

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☒ None of the above apply

Does the creditor have a lien on your property?

- ☒ No

Debtor 1 **Bolivar F. Martinez Cueva** Case number (if known) _____

Contact ☐ Yes. Total claim (secured and unsecured) _____
 Value of security: - _____
 Contact phone _____ Unsecured claim _____

11 What is the nature of the claim? Credit card purchases \$12,941.94

**PASSAIC METAL & BUILDING
SUPPLIES CO.
6 CAMPUS DR, SUITE 304
Parsippany, NJ 07054**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☒ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
☐ Yes. Total claim (secured and unsecured) _____
 Value of security: - _____
 Unsecured claim _____

Contact _____
 Contact phone _____

12 What is the nature of the claim? Credit card purchases \$204,509.00

**PENNYMAC LOAN SERVICES
LLC
PO BOX 514387 M
Los Angeles, CA 90051**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☒ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
☐ Yes. Total claim (secured and unsecured) _____
 Value of security: - _____
 Unsecured claim _____

Contact _____
 Contact phone _____

13 What is the nature of the claim? Credit card purchases \$384,860.00

**SELECT PORTFOLIO
SERVICING
3815 S WEST TEMPLE
Salt Lake City, UT 84115**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☒ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
☐ Yes. Total claim (secured and unsecured) _____
 Value of security: - _____
 Unsecured claim _____

Contact _____
 Contact phone _____

14 What is the nature of the claim? Credit card purchases \$11,360.16

STATE OF NJ

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☒ None of the above apply

Does the creditor have a lien on your property?

Debtor 1 **Bolivar F. Martinez Cueva** Case number (if known) _____

| | | |
|---------------|---|---------|
| _____ | <input checked="" type="checkbox"/> No | |
| Contact | <input type="checkbox"/> Yes. Total claim (secured and unsecured) | _____ |
| _____ | Value of security: | - _____ |
| Contact phone | Unsecured claim | _____ |

| | | | | |
|-----------|-----------------------------------|--|-------------------------------------|---------------------------|
| 15 | THD/CBNA | What is the nature of the claim? | <u>Credit card purchases</u> | <u>\$13,705.00</u> |
| | 5800 SOUTH CORPORATE PLACE | As of the date you file, the claim is: Check all that apply | | |
| | Sioux Falls, SD 57108 | <input type="checkbox"/> Contingent | | |
| | _____ | <input type="checkbox"/> Unliquidated | | |
| | | <input type="checkbox"/> Disputed | | |
| | | <input checked="" type="checkbox"/> None of the above apply | | |
| | | Does the creditor have a lien on your property? | | |
| | _____ | <input checked="" type="checkbox"/> No | | |
| | Contact | <input type="checkbox"/> Yes. Total claim (secured and unsecured) | _____ | |
| | _____ | Value of security: | - _____ | |
| | Contact phone | Unsecured claim | _____ | |

| | | | | |
|-----------|------------------|--|-------------------------------------|---------------------------|
| 16 | UNIVERSAL | What is the nature of the claim? | <u>Credit card purchases</u> | <u>\$26,855.98</u> |
| | | As of the date you file, the claim is: Check all that apply | | |
| | _____ | <input type="checkbox"/> Contingent | | |
| | | <input type="checkbox"/> Unliquidated | | |
| | | <input type="checkbox"/> Disputed | | |
| | | <input checked="" type="checkbox"/> None of the above apply | | |
| | | Does the creditor have a lien on your property? | | |
| | _____ | <input checked="" type="checkbox"/> No | | |
| | Contact | <input type="checkbox"/> Yes. Total claim (secured and unsecured) | _____ | |
| | _____ | Value of security: | - _____ | |
| | Contact phone | Unsecured claim | _____ | |

| | | | | |
|-----------|--------------------------------|--|-------------------------------------|----------------------------|
| 17 | US DEPT of the Treasury | What is the nature of the claim? | <u>Credit card purchases</u> | <u>\$714,310.79</u> |
| | PO BOX 979101 | As of the date you file, the claim is: Check all that apply | | |
| | Saint Louis, MO 63197 | <input type="checkbox"/> Contingent | | |
| | _____ | <input type="checkbox"/> Unliquidated | | |
| | | <input type="checkbox"/> Disputed | | |
| | | <input checked="" type="checkbox"/> None of the above apply | | |
| | | Does the creditor have a lien on your property? | | |
| | _____ | <input checked="" type="checkbox"/> No | | |
| | Contact | <input type="checkbox"/> Yes. Total claim (secured and unsecured) | _____ | |
| | _____ | Value of security: | - _____ | |
| | Contact phone | Unsecured claim | _____ | |

| | | | | |
|-----------|---------------------------|--|-------------------------------------|---------------------------|
| 18 | US SMALL BSUINESS | What is the nature of the claim? | <u>Credit card purchases</u> | <u>\$12,275.00</u> |
| | ADMINISTRATION | As of the date you file, the claim is: Check all that apply | | |
| | PO BOX 3918 | <input type="checkbox"/> Contingent | | |
| | Portland, OR 97208 | <input type="checkbox"/> Unliquidated | | |
| | _____ | <input type="checkbox"/> Disputed | | |
| | | <input checked="" type="checkbox"/> None of the above apply | | |

Debtor 1 **Bolivar F. Martinez Cueva** Case number (if known) _____

Contact _____

Contact phone _____

Does the creditor have a lien on your property?

☒ No
☐ Yes. Total claim (secured and unsecured) _____
Value of security: - _____
Unsecured claim _____

19 W. COMPENSATION

What is the nature of the claim? Credit card purchases **\$16,147.00**

As of the date you file, the claim is: Check all that apply

☐ Contingent
☐ Unliquidated
☐ Disputed
☒ None of the above apply

Contact _____

Contact phone _____

Does the creditor have a lien on your property?

☒ No
☐ Yes. Total claim (secured and unsecured) _____
Value of security: - _____
Unsecured claim _____

**20 WESTGATE RESORTS
PO BOX 668
Ocoee, FL 34761**

What is the nature of the claim? Credit card purchases **\$26,944.00**

As of the date you file, the claim is: Check all that apply

☐ Contingent
☐ Unliquidated
☐ Disputed
☒ None of the above apply

Contact _____

Contact phone _____

Does the creditor have a lien on your property?

☒ No
☐ Yes. Total claim (secured and unsecured) _____
Value of security: - _____
Unsecured claim _____

Part 2: Sign Below

Under penalty of perjury, I declare that the information provided in this form is true and correct.

X /s/ Bolivar F. Martinez Cueva
Bolivar F. Martinez Cueva
Signature of Debtor 1

X _____
Signature of Debtor 2

Date June 12, 2025

Date _____

ABC

AMERICAN BUILDERS & CONTRACTORS SUPPLY CO

AMERICAN EXPRESS
PO BOX 31511
Salt Lake City, UT 84131

AMERICAN EXPRESS
PO BOX 31511
Salt Lake City, UT 84131

AMERICAN EXPRESS
PO Box 981537
El Paso, TX 79998

AUTOZONE
PO BOX 8390
Metairie, LA 70011

Bank of America
PO Box 982234
El Paso, TX 79998-2234

BANK OF AMERICA
4060 OGLETOWN/STANTON RD DE5--019-03-07
Newark, DE 19713

BEACON

BESTBUY/CBNA
5800 SOUTH CORPORATE PLACE
Sioux Falls, SD 57108

BRKSB/CBNA
P.O. Box 60517
City of Industry, CA 91716

BROOKS BROTHERS/CBNA
5800 SOUTH CORPORATE PLACE
Sioux Falls, SD 57108

Capital One Bank
PO Box 85520
Richmond, VA 23285-5520

CAPITAL ONE BANK USA NA
PO BOX 31293
Salt Lake City, UT 84131

Citi Bank
388 Greenwich Street
New York, NY 10013

Citi Bank
388 Greenwich Street
New York, NY 10013

CITI BANK
P.O. Box 9001037
Louisville, KY 40290

CITIBANK, N.A.
PO BOX 461210
Bedford, OH 44146

Citicards CBNA
701 E 60th St N
Sioux Falls, SD 57104-0432

CITICARDS CBNA
5800 S CORPORATE PLACE
Sioux Falls, SD 57108

CITICARDS CBNA
5800 S CORPORATE PLACE
Sioux Falls, SD 57108

CITICARDS CBNA
5800 SOUTH CORPORATE PLACE
57108

CLEAR SPRING PROPERTY & CAUSALTY
PO BOX 30980-0980
Los Angeles, CA 90030

CLEAR SPRING PROPERTY & CAUSALTY CO.
227 W MONROE, SUITE 3950
Chicago, IL 60606

COASTAL

DEPT OF LABOR (OSHA)
200 CrossKeys Office Park
Fairport, NY 14450

Dept. of Labor (OSHA)
PO BOX 246
Geneseo, NY 14454

FRONTLINE LEGAL SERVICE, LLC

IRM CAPITAL (SKYLIANCE)

KASLANDER

LOWES

Mulligan Funding LLC

NATIONAL

new castle

NEW CASTLE BUILDING PRODUCTS CORP.
900 RT 168, SUITE C-2
Blackwood, NJ 08012

NJ Manufacturers Insurance Group
One Pierce Pl, Suite 725W
Itasca, IL 60143

ON DECK CAPITAL, INC.
102 LAUREL OAK RD, STE 303
Voorhees, NJ 08043

OneMain
PO BOX 64
Evansville, IN 47701

ONEMAIN
601 NW 2ND St
Evansville, IN 47706

OneMain Financial
PO Box 3251
Evansville, IN 47731-3251

PAMPCO

PASSAIC METAL & BUILDING SUPPLES CO.
6 CAMPUS DR, SUITE 304
Parsippany, NJ 07054

PASSAIC METAL & BUILDING SUPPLIES, CO.

PENNYMAC LOAN SERVICES LLC
PO BOX 514387 M
Los Angeles, CA 90051

PROSPER MARKETPLACE INC.
221 Main St Ste 300
San Francisco, CA 94105

PROSPERMP
Prosper Marketplace Inc.
P.O. Box 886081
Los Angeles, CA 90088

RED/STATE INCOME TAX RETURNS

SANTANDER BANK, NA
1130 BERKSHIRE BLVD, FL 3
Reading, PA 19610

SBA LOAN

SELECT PORTFOLIO SERVICING
3815 S WEST TEMPLE
Salt Lake City, UT 84115

SRS DISTRIBUTION, INC.
648 WYCKOFF AVE
Wyckoff, NJ 07481

STATE OF NJ

THD/CBNA
5800 SOUTH CORPORATE PLACE
Sioux Falls, SD 57108

THD/CBNA
Dept 3877 GreenSky
PO Box 70877
Charlotte, NC 28272

UNIVERSAL

US DEPT OF LABOR
500 RT 17 SOUTH, 2ND FL
Hasbrouck Heights, NJ 07604

US DEPT of the Treasury
PO BOX 979101
Saint Louis, MO 63197

US SMALL BUSINESS ADMINISTRATION
PO BOX 3918
Portland, OR 97208

US SMALL BUSINESS ADMIN. - DISASTER
14925 KINGSPORT RD
Fort Worth, TX 76155

W. COMPENSATION

WESTGATE RESORTS
PO BOX 668
Ocoee, FL 34761